

NOT FOR: COMPLETED APPLICATION, TAX
 STATEMENT, FEE AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)
RECEIVED
 MAR 12 2021

Permit #:	21-0111
Date:	5-14-21
Amount Paid:	\$175 TBA \$105 LV
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
 Checks are made payable to: Bayfield County Zoning Department.

Bayfield Co. Zoning Dept.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: CHARLES K. SINGLER				Mailing Address: 68525 Fish Creek Rd				City/State/Zip: Ashland WI 54806				Telephone: 715 685 4725			
Address of Property: NA				City/State/Zip: Ashland WI 54806				Contractor: CAMPBELL CONSTRUCTION				Plumber: NA			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone: 715 682 0075				Agent Mailing Address (include City/State/Zip):				Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)						Tax ID# 11242		Recorded Document: (Showing Ownership) 871 558					
NW 1/4, SE 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Section 15 , Township 49 N, Range 07 W		Town of: Clover						Lot Size NA		Acreage 40					

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$35K	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input checked="" type="checkbox"/> None
	<input type="checkbox"/> Relocate (existing bldg)				<input checked="" type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property				<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>				<input type="checkbox"/> Compost Toilet	

Existing Structure: (if addition, alteration or business is being applied for)	Length: 40	Width: 20	Height: 20
Proposed Construction: (overall dimensions)	Length: 27	Width: 32	Height: 25

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(X)	
	<input type="checkbox"/> with Loft	(X)	
	<input type="checkbox"/> with a Porch	(X)	
	<input type="checkbox"/> with (2nd) Porch	(X)	
	<input type="checkbox"/> with a Deck	(X)	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with (2nd) Deck	(X)	
	<input type="checkbox"/> with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/> Mobile Home (manufactured date) _____	(X)	
	<input checked="" type="checkbox"/> Addition/Alteration (explain) Living/dinning addition + Porch	(24 X 32)	768
	<input type="checkbox"/> Accessory Building (explain) _____	(X)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/> Special Use: (explain) _____	(X)	
	<input type="checkbox"/> Conditional Use: (explain) _____	(X)	
<input type="checkbox"/> Other: (explain) _____	(X)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Charles K. Singler
 (If there are Multiple Owners listed on the Deed All owners must sign or letter(s) of authorization must accompany this application)

Date 3-11-21

Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit 68525 Fish Creek Rd Ashland, WI 54806

Attach
 Copy of Tax Statement

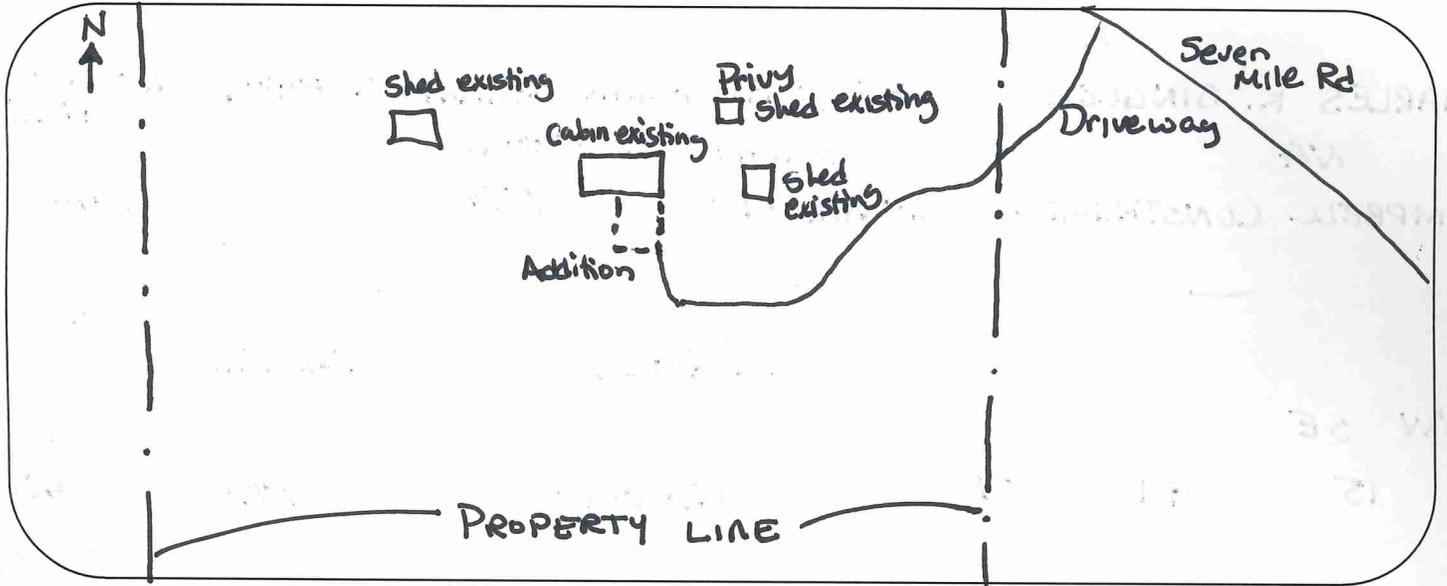
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

Box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (* Driveway and (* Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)
- (6) Show any (*): (* Lake; (* River; (* Stream/Creek; or (* Pond
- (7) Show any (*): (* Wetlands; or (* Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	2,200 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	2,200 Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	800 Feet	Setback from Wetland	1800 Feet
Setback from the South Lot Line	1800 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	500 Feet	Elevation of Floodplain	NA Feet
Setback from the East Lot Line	780 Feet		
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	75 Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-011		Permit Date: 5-14-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Inspection Record: Existing cabin that pre-dates zoning w/ proposed addition. Appears code compliant.		Zoning District (F1) Lakes Classification (-)		
Date of Inspection: 4-8-21	Inspected by: Todd Norwood	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (If No they need to be attached.)				
Must obtain a uniform Dwelling Code (UDC) permit from the locally contracted UDC inspection agency prior to start of construction, if required. No pressurized water or plumbing allowed in structure. must meet and maintain setbacks.				
Signature of Inspector: Todd Norwood				Date of Approval: 5-10-21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

City, Village, State or Federal
May Also Be Required

LAND USE – **X**
SANITARY – **Pit Privy**
SIGN –
SPECIAL – **Class A**
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0111** Issued To: **Charles Singler**

Location: **NW** ¼ of **SE** ¼ Section **15** Township **49** N. Range **7** W. Town of **Clover**

Gov't Lot Lot Block Subdivision CSM#

For: **Residential Addition: [1- Story; Living / Dining / Porch (24' x 32') = 768 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must obtain a uniform dwelling code permit from the locally contracted UDC inspection agency prior to the start of construction, if required. No pressurized water or plumbing allowed in structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Todd Norwood
Authorized Issuing Official

May 14, 2021
Date

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY - 298157
SIGN -
SPECIAL - NA
CONDITIONAL - NA
BOA -

**BAYFIELD COUNTY
PERMIT**

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 04012104-2021

Tax ID: 12087

Issued To: GARY L & KAREN DAVIDSON

Location: LOT 5 CSM #857 IN V.5 P.363 Section 26
(LOCATED IN GOVT LOT 4)

Township 51 N.

Range 07 W.

CLOVER

Govt Lot 1

Lot 0

Block 0

Subdivision:

CSM# 857

For. Residential / Other / 20L x 3W x 2H, Deck: 10L x 14W x1H

Condition(s): Must comply with design standards and requirements found in Bayfield County Zoning Ordinance Section 13-1-22(5)(g)1-9

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

Rob Schierman

Authorized Issuing Official

Tue May 11 2021

Date

(Disclaimer): Any future expansions or development requires additional permitting.

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY - municipal
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

**BAYFIELD COUNTY
PERMIT
WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 02022101-2021

Tax ID: 11369

Issued To: LOUIS MORELLI JR

Location: PAR IN GOVT LOT 3 IN V.1069 Section 04
P. 615 200

Township 50 N.

Range 07 W.

CLOVER

Govt Lot 1

Lot

Block

Subdivision:

CSM#

For: Residential / Detached Garage / 36L x 24W x 12H

Condition(s): Structure not for human habitation/sleeping purposes. No pressurized water or plumbing allowed inside structure without a confirmed connection to the municipal sewer. Must meet and maintain setbacks.

Note: Correct location of structure shown on PDF attached to application.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

Todd Norwood

Authorized Issuing Official

Mon May 10 2021

Date

(Disclaimer): Any future expansions or development requires additional permitting.

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY - 389397
SIGN -
SPECIAL - NA
CONDITIONAL - NA
BOA -

**BAYFIELD COUNTY
PERMIT
WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 04292103-2021

Tax ID: 11355

Issued To: CHRIS A & LISA A DAHL

Location: LOT 1 CSM #1105 IN V.7 P.73 Section 04
(LOCATED IN GOVT LOT 1) IN DOC
2020R-583366

Township 50 N.

Range 07 W.

CLOVER

Govt Lot 0

Lot 0

Block 0

Subdivision:

CSM# 1105

For: Residential / Other / 100L x 3W x 1H

Condition(s): Must comply with design standards and requirements found in Bayfield County Zoning Ordinance Section 13-1-22(5)(g)1-9

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

Rob Schierman

Authorized Issuing Official

Tue May 11 2021

Date

(Disclaimer): Any future expansions or development requires additional permitting.